

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

*1017331657*  
*PO 8027 MD 03 32*

## CLAIMS AS FILED - PART I

|   | (Column 1)           | (Column 2)   |  |
|---|----------------------|--------------|--|
| TOTAL CLAIMS  | <i>28</i>            |              |  |
| FOR   | NUMBER FILED         | NUMBER EXTRA |  |
| TOTAL CHARGEABLE CLAIMS                                   | <i>28</i> minus 20 = | <i>8</i>     |  |
| INDEPENDENT CLAIMS  | <i>1</i> minus 3 =   | <i>0</i>     |  |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                      |              |  |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

|                         | (Column 1)  |           | (Column 2)                         |           | (Column 3)    |
|-------------------------|---|-----------|------------------------------------|-----------|---------------|
| AMENDMENT <i>4/9/07</i> | CLAIMS REMAINING AFTER AMENDMENT  |           | HIGHEST NUMBER PREVIOUSLY PAID FOR |           | PRESENT EXTRA |
|                         | Total   | <i>27</i> | Minus                              | <i>28</i> | <i>0</i>      |
|                         | Independent   | <i>1</i>  | Minus                              | <i>1</i>  | <i>0</i>      |
|                         | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |           |                                    |           |               |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 385.00 | OR | BASIC FEE | 770.00 |
| X\$ 9=    |        | OR | X\$18=    |        |
| X43=      |        | OR | X86=      |        |
| +145=     |        | OR | +290=     |        |
| TOTAL     |        | OR | TOTAL     |        |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 9=           |                 | OR | X\$18=           |                 |
| X43=             |                 | OR | X86=             |                 |
| +145=            |                 | OR | +290=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

|                          | (Column 1)  |           | (Column 2)                         |           | (Column 3)    |
|--------------------------|---|-----------|------------------------------------|-----------|---------------|
| AMENDMENT <i>9-24-07</i> | CLAIMS REMAINING AFTER AMENDMENT  |           | HIGHEST NUMBER PREVIOUSLY PAID FOR |           | PRESENT EXTRA |
|                          | Total   | <i>27</i> | Minus                              | <i>28</i> | <i>0</i>      |
|                          | Independent   | <i>1</i>  | Minus                              | <i>3</i>  | <i>0</i>      |
|                          | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |           |                                    |           |               |

| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 9=           |                 | OR | X\$18=           |                 |
| X43=             |                 | OR | X86=             |                 |
| +145=            |                 | OR | +290=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

|             | (Column 1)  |  | (Column 2)                         |  | (Column 3)    |
|-------------|---|--|------------------------------------|--|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT  |  | HIGHEST NUMBER PREVIOUSLY PAID FOR |  | PRESENT EXTRA |
|             | Total   |  | Minus                              |  |               |
|             | Independent   |  | Minus                              |  |               |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |  |                                    |  |               |

| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 9=           |                 | OR | X\$18=           |                 |
| X43=             |                 | OR | X86=             |                 |
| +145=            |                 | OR | +290=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.